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9ib Data Sheet

CONFIRMATION NO. 1425

<b>SERIAL NUMBER</b> 09/844,220	<b>FILING DATE</b> 04/26/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> P-8922.02 CIP
<b>APPLICANTS</b> David E. Francischelli, Anoka, MN; Scott E. Jahns, Hudson, WI; James R. Keogh, Maplewood, MN;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/560,507 04/27/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/19/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 11	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 7
<b>ADDRESS</b> Stephen W. Bauer Medtronic, Inc. 710 Medtronic Parkway Minneapolis, MN 55432				
<b>TITLE</b> System and method for assessing transmural of ablation lesions				
<b>FILING FEE RECEIVED</b> 1660	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			
				<input type="checkbox"/> All Fees
				<input type="checkbox"/> 1.16 Fees ( Filing )
				<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
				<input type="checkbox"/> 1.18 Fees ( Issue )
				<input type="checkbox"/> Other _____
				<input type="checkbox"/> Credit